US Found Helpful for Pelvic Exams in Obese

VITALS

Major Finding: Obese patients referred for inadequate pelvic examinations were significantly less likely than nonobese patients to have a complete ultrasound assessment (62% vs. 81%), yet they were significantly more likely to have abnormal findings detected on ultrasound (48% vs. 22%).

Data Source: A single-center study of 103 patients referred specifically for inadequate pelvic examinations.

Disclosures: None was reported.

BY DOUG BRUNK

FROM THE ANNUAL MEETING OF THE AMERICAN INSTITUTE OF ULTRASOUND IN MEDICINE

SAN DIEGO — Ultrasound is a useful adjunct for completing difficult pelvic examinations, especially when obesity is present, results from a single-center study showed.

"Obesity is one of the leading health care concerns in the United States," Dr. Francisco Cruz-Pachano said at the meeting. According to the Centers for Disease Control and Prevention, one-third of adults in the United States are obese, and more than 40% of childbearing women aged 15-49 years are overweight or obese. The condition has been linked multiple times to a difficult pelvic exam.

Other factors that may complicate routine pelvic exams, he said, include increasing rates of abdominal plastic surgery, extremes of age, and history of radiation to the abdomen or pelvis.

In an effort to analyze the findings encountered on sonographic evaluations done secondary to difficult pelvic examinations, Dr. Cruz-Pachano and his associates

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reviewed the charts of 3,400 patients who visited the ultrasound division of the department of obstetrics and gynecology at the University of Miami between August 2007 and August 2009. Of these patients, 103 (3%) were referred specifically for inadequate pelvic examinations.

"This translates into 1-10 patients per month, depending on how busy a practice is," he said.

The mean age of the 103 patients was 50 years, 37% were black, 37% were Hispanic, and 26% were white. Their mean body mass index was 33 kg/m^2, and 67 patients (65%) were obese, while the remaining 36 (35%) were overweight or had a normal BMI.

When the chief complaint of patients was analyzed, 57 (55%) were seen for a routine exam while the remaining 46 (45%) had different complaints including pelvic pain, abnormal uterine bleeding, and urinary dysfunction.

Nearly two-thirds of the ultrasound exams (69%) were found to be normal. But the ovaries were not detectable on ultrasound 25% of the time. The most common findings on ultrasound were fibroids (17%) and ovarian cysts (15%).

When the researchers compared obese patients with nonobese patients, they found that obese patients were significantly less likely to have a complete ultrasound assessment (62% vs. 81%), yet they were significantly more likely to have abnormal findings detected on ultrasound (48% vs. 22%).

"We have to counsel obese patients that because of their body habitus, they have an increased chance of having an incomplete pelvic assessment and an increased chance of having findings on ultrasound," Dr Cruz-Pachano concluded. ■

Race a Factor In Completing HPV Series

BY DEBRA L. BECK

FROM THE ANNUAL MEETING OF THE SOCIETY FOR ADOLESCENT HEALTH AND MEDICINE

TORONTO — Girls who identified themselves as white were twice as likely as those who identified themselves as black to complete the three-shot vaccination series against the human papillomavirus, according to a retrospective investigation of medical records.

"This is concerning because, historically, black women have had lower rates of cervical cancer screening and been more at risk from dying of cervical cancer. With unequal distribution of the vaccine, the racial disparity in cervical cancer may worsen," Dr. Lea Widdice said in a poster at the meeting.

VITALS

Major Finding: Eleven percent of girls who self-identified as black received all three doses of the HPV vaccine, compared with 22% of the white girls and 15% of those identified as other races.

Data Source: A retrospective study of medical records on 3,297 girls between ages 9 and 26 years who received the first HPV vaccine dose between June 2006 and June 2008 from an urban medical center.

Disclosures: None was reported.

Moreover, overall, only 14% of girls initiating the HPV vaccine series actually completed the three-shot series within 7 months of the first dose.

Clinical recommendations for the vaccine are to get the third shot 6 months after the first.

Dr. Widdice and her colleagues conducted a retrospective investigation of medical records on 3,297 girls between ages 9 and 26 years who received the first HPV vaccine dose between June 2006 and June 2008 from an urban, academic pediatric medical center with multiple primary care and specialty clinics.

Overall, 11% of the black girls received all three doses of the vaccine, compared with 22% of the white girls and 15% of those identified as other races, reported Dr. Widdice, a pediatrician at the Cincinnati Children's Hospital Medical Center.

Patients were predominantly from primary care (95%) and 65% used Medicaid. The majority (67%) self-identified as black, 29% said they were white, and 4% were classified as other races.

Even after investigators controlled for factors such as type of insurance and the different types of clinics giving the vaccine (primary care pediatrics, adolescent primary care, adolescent specialty clinics, or other specialty clinics), race was still strongly associated with getting all three of the doses on schedule. ■